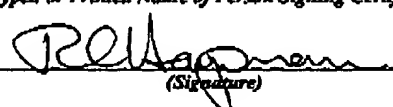



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 01032
Applicant(s): Alan Tura			
Application No. 09/766,930	Filing Date January 23, 2001	Examiner Chang, Audrey Y.	Group Art Unit 2872
Invention: THREE DIMENSIONAL METHOD OF DECORATING ON A CURVILINEAR SURFACE			
RECEIVED CENTRAL FAX CENTER JUL 13 2004 OFFICIAL			
I hereby certify that this <u>Amendment</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax, No. <u>(703) 872-9306</u>) on <u>July 13, 2004</u> (Date) <div style="text-align: right;"><u>R.C. Harpman</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</div>			
Note: Each paper must have its own certificate of mailing.			

P18/REV02

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. 01032	
Applicant(s): Alan Tura						
Application No. 09/766,930	Filing Date January 23, 2001	Examiner Chang, Audrey Y.	Customer No. 27149	Group Art Unit 2872	Confirmation No. 1240	
Invention: THREE DIMENSIONAL METHOD OF DECORATING ON A CURVILINEAR SURFACE						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	8 -	20 =	0 x		\$0.00	
INDEP. CLAIMS	1 -	3 =	0 x		\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment.						
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____						
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.						
<input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____						
<input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.						
<input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.						
 R.C. Harpman, Reg. No. 29,802			Dated: July 13, 2004			
CC:			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
			Signature of Person Mailing Correspondence			
			Typed or Printed Name of Person Mailing Correspondence			

P11SMALL/REV07